SAUK COUNTY HEALTH CARE CENTER

S4555 HWY CH

REEDSBURG	53959	Phone: (608) 524-4371	L	Ownership:	County
Operated from	1/1 To 12/31	Days of Operation	365	Highest Level License:	Skilled
Operate in Con	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/05):	110	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/05):	134	Title 19 (Medicaid) Certified?	Yes
Number of Resi	dents on 12/31	/05:	94	Average Daily Census:	101

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)				
Primary Diagnosis	8	Age Groups 	* 	 Less Than 1 Year 1 - 4 Years	38.3 44.7
Developmental Disabilities	0.0	Under 65	4.3	More Than 4 Years	17.0
Mental Illness (Org./Psy)	46.8	65 - 74	11.7		
Mental Illness (Other)	2.1	75 - 84	27.7		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	45.7		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.6	Full-Time Equivalent	
Cancer	4.3			Nursing Staff per 100 Resid	lents
Fractures	3.2		100.0	(12/31/05)	
Cardiovascular	8.5	65 & Over	95.7		
Cerebrovascular	14.9			RNs	13.0
Diabetes	6.4	Gender	8	LPNs	12.3
Respiratory	0.0			Nursing Assistants,	
Other Medical Conditions	13.8	Male	35.1	Aides, & Orderlies	65.0
		Female	64.9		
	100.0				
		İ	100.0	İ	

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other		Ī	Private Pay	:		amily Care			Managed Care	Į		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	2	25.0	356	2	3.1	137	0	0.0	0	1	4.8	170	0	0.0	0	0	0.0	0	5	5.3
Skilled Care	6	75.0	406	62	96.9	117	0	0.0	0	20	95.2	158	0	0.0	0	1	100.0	440	89	94.7
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0		64	100.0		0	0.0		21	100.0		0	0.0		1	100.0		94	100.0

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Admissions, Discharges, and	Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05										
Deaths During Reporting Period	 		Total								
Percent Admissions from:		Activities of	%		% Needing ssistance of	% Totally	Number of				
Private Home/No Home Health	3.6	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents				
Private Home/With Home Health	2.7	Bathing	0.0		89.4	10.6	94				
Other Nursing Homes	3.6	Dressing	6.4		85.1	8.5	94				
Acute Care Hospitals	82.9	Transferring	27.7		61.7	10.6	94				
Psych. HospMR/DD Facilities	1.8	Toilet Use	23.4		60.6	16.0	94				
Rehabilitation Hospitals	0.0	Eating	62.8		26.6	10.6	94				
Other Locations	0.0	*******	******	*****	*******	******	******				
Total Number of Admissions	111	Continence		%	Special Treatmen	ts	용				
Percent Discharges To:		Indwelling Or Extern	nal Catheter	3.2	Receiving Resp	iratory Care	8.5				
Private Home/No Home Health	23.8	Occ/Freq. Incontiner	nt of Bladder	56.4	Receiving Trac	heostomy Care	0.0				
Private Home/With Home Health	21.3	Occ/Freq. Incontiner	nt of Bowel	10.6	Receiving Suct	ioning	0.0				
Other Nursing Homes	0.8				Receiving Osto	my Care	1.1				
Acute Care Hospitals	10.7	Mobility			Receiving Tube	Feeding	1.1				
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	2.1	Receiving Mech	anically Altered Diets	35.1				
Rehabilitation Hospitals	0.0	<u> </u>									
Other Locations	0.0	Skin Care			Other Resident C	haracteristics					
Deaths	41.0	With Pressure Sores		4.3	Have Advance D	irectives	83.0				
Total Number of Discharges		With Rashes		4.3	Medications						
(Including Deaths)	122	j			Receiving Psyc	hoactive Drugs	62.8				

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

***************	*****	*****	*****	*****	*****	*****	*****	*****	*****
		Owne	ership:	Bed	Size:	Lic	ensure:		
	This		Government		-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	8	%	Ratio	ઇ	Ratio	ે	Ratio	ઇ	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	76.0	85.3	0.89	88.8	0.86	88.3	0.86	88.1	0.86
Current Residents from In-County	92.6	56.6	1.64	81.0	1.14	70.5	1.31	77.6	1.19
Admissions from In-County, Still Residing	29.7	29.1	1.02	23.7	1.25	20.5	1.45	18.1	1.64
Admissions/Average Daily Census	109.9	66.2	1.66	124.7	0.88	123.5	0.89	162.3	0.68
Discharges/Average Daily Census	120.8	66.9	1.81	127.4	0.95	126.7	0.95	165.1	0.73
Discharges To Private Residence/Average Daily Census	54.5	21.0	2.60	53.4	1.02	50.1	1.09	74.8	0.73
Residents Receiving Skilled Care	100		1.13	96.8	1.02				1.09
<u> </u>		88.8				94.1	1.06	92.1	
Residents Aged 65 and Older	95.7	87.7	1.09	92.1	1.04	92.5	1.04	88.4	1.08
Title 19 (Medicaid) Funded Residents	68.1	77.3	0.88	68.7	0.99	70.2	0.97	65.3	1.04
Private Pay Funded Residents	22.3	16.6	1.34	18.5	1.20	19.0	1.17	20.2	1.11
Developmentally Disabled Residents	0.0	0.5	0.00	0.4	0.00	0.5	0.00	5.0	0.00
Mentally Ill Residents	48.9	47.5	1.03	38.6	1.27	37.2	1.32	32.9	1.49
General Medical Service Residents	13.8	18.8	0.74	24.6	0.56	23.8	0.58	22.8	0.61
Impaired ADL (Mean)	43.8	43.6	1.01	48.5	0.90	47.2	0.93	49.2	0.89
Psychological Problems	62.8	67.7	0.93	57.4	1.09	58.9	1.07	58.5	1.07
Nursing Care Required (Mean)	6.8	8.2	0.83	7.1	0.95	7.1	0.95	7.4	0.91